

PATENT APPLICATION FEE TERMINATION RECORD  
Effective October 1, 2000

Application or Docket Number

09/763129

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |               |                                     |
|----------------------------------|---------------|-------------------------------------|
| TOTAL CLAIMS                     |               |                                     |
| FOR                              | NUMBER FILED  | NUMBER EXTRA                        |
| TOTAL CHARGEABLE CLAIMS          | 24 minus 20 = | 4                                   |
| INDEPENDENT CLAIMS               | 6 minus 3 =   | 3                                   |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input checked="" type="checkbox"/> |

SMALL ENTITY  
TYPE

OR OTHER THAN  
SMALL ENTITY

|           |      |           |      |
|-----------|------|-----------|------|
| RATE      | FEES | RATE      | FEES |
| BASIC FEE |      | BASIC FEE | 690  |
| XS 9=     |      | XS18=     | 72   |
| X40=      |      | X80=      | 240  |
| +135=     |      | +270=     | 270  |
| TOTAL     |      | OR TOTAL  | 1272 |

If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------|---|------------------|
|  | Total                                     | 24    | Minus                                       | 24               |
| Independent                                    | 6   | Minus | 6   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   |                  |

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

|                  |                        |                     |                        |
|------------------|------------------------|---------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | X\$18=              |                        |
| X40=             |                        | X80=                |                        |
| +135=            |                        | +270=               |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------|---|------------------|
|  | Total                                     | 24    | Minus                                       | 24               |
| Independent                                    | 6   | Minus | 6   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   |                  |

|                  |                        |                     |                        |
|------------------|------------------------|---------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | X\$18=              |                        |
| X40=             |                        | X80=                |                        |
| +135=            |                        | +270=               |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------|---|------------------|
|  | Total                                     | 24    | Minus                                       | 24               |
| Independent                                    | 6   | Minus | 6   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   |                  |

|                  |                        |                     |                        |
|------------------|------------------------|---------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | X\$18=              |                        |
| X40=             |                        | X80=                |                        |
| +135=            |                        | +270=               |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

If the entry in column 1 is less than the entry in column 2, write "0" in column 3

If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20"

If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3"

The Highest Number Previously Paid For (Total or independent) is the highest number found in the appropriate box in column 2